

BEST AVAILABLE COPY

PATENT

MS158546.1 / MSFTP203US

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being faxed to (703) 872-9306 the date shown below at the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Date: 10-6-04

Himanshu S. Amin

RECEIVED  
CENTRAL FAX CENTER  
OCT 06 2004

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:

Applicants: Lance E. Olson, *et al.*

Examiner: Van H. Nguyen

Serial No: 09/818,447

Art Unit: 2126

Filing Date: March 27, 2001

Title: PROTOCOL AGNOSTIC REQUEST RESPONSE PATTERN

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## REPLY TO RESTRICTION REQUIREMENT MAILED SEPTEMBER 22, 2004

This Reply is in response to the Restriction Requirement mailed on September 22, 2004 in connection with the above-identified patent application.

The Examiner requires restriction to one of the following three groups of claims:

Group I - Claims 1-16 and 29, drawn to a system for communication over a protocol.

Group II - Claims 17-24 and 28, drawn to a method for allowing a computer program to communicate over one of a plurality of protocols.

Group III - Claims 25-27, drawn to a data packet adapted to be transmitted between two or more computer processes.

09/818,447

MS158546.1 / MSFTP203US

Applicants' representative hereby elects with traverse Group I (Claims 1-16 and 29) for further prosecution on the merits.

Should there be any questions regarding this paper, the Examiner is invited to contact applicants' undersigned representative at the telephone number listed below.

In the event any fees are due in connection with submission of this document, the Commissioner is authorized to charge such fees to Deposit Account No. 50-1063.

Respectfully submitted,

AMIN & TUROCY, LLP



Himanshu S. Amin  
Reg. No. 40,894

AMIN & TUROCY, LLP  
24<sup>TH</sup> Floor, National City Center  
1900 East 9<sup>TH</sup> Street  
Cleveland, Ohio 44114  
Telephone: (216) 696-8730  
Facsimile: (216) 696-8731

**This Page is Inserted by IFW Indexing and Scanning  
Operations and is not part of the Official Record**

**BEST AVAILABLE IMAGES**

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☐ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☐ **FADED TEXT OR DRAWING**
- ☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☐ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** \_\_\_\_\_

**IMAGES ARE BEST AVAILABLE COPY.**

**As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.**